

Foster Family Home - Corrective Action Report

Provider ID: 4-594029

Home Name: Norita Morrison, CNA

20 Keoneloia Street

Wailuku

HI 96793

Review ID: 4-594029-10

Reviewer: Terri Van Houten

Begin Date: 9/21/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Unannounced annual home inspection for 3 bed CCFFH. Report issued during home inspection with written plan of correction due to CTA by 10/21/2020

Foster Family Home

Background Checks

[11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1) CG#1 eCrim lapse-Due for renewal 7/2019.

Foster Family Home

Fire Safety

[11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

46.(a) - Last fire drill documented from 10/2019.

3 Person Fire Safety, Natural Disaster

3 Person Fire Safety

(3P) Fire

(3P)(e)(1) Fire Walls separating the client's sleeping room shall be separated from other rooms and hallways with construction equal to or exceeding one-half inch non-rated gypsum board to create an effective barrier to smoke. Doors shall be provided and shall include latches, stops, jambs, and shall be tight fitting to create an effective barrier to smoke;

Comment:

(3P)(e)(1) Fire - Client #2-bedroom is an addition to the community living space. Room is not permitted by DPP. Walls are constructed of ply wood which has been painted, but does not have gypsum board covering. In one section of the room, the walls do not reach to the ceiling.

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Physical Environment

[11-800-49]

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

49.(a)(5) An operating underwriters laboratory approved smoke detector and fire extinguisher in appropriate locations; and

Comment:

49.(a)(4) - Residence has partial kitchen on main level where clients reside. Doorway access to kitchen area is not wide enough to permit wheelchair access. (Two of three clients require wheel chair for mobility)

49.(a)(5) - First level of home has no working smoke detectors.

Li Vauthour
Compliance Manager

9/21/2020

[Signature]
Primary Care Giver

9/21/2020
Date

CTA RN Compliance Manager: Terri Van Houten RN

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate: NORITA MORRISON
(PLEASE PRINT)

CCFFH Address: 20 KEONELOA ST. WAILUKU HI, 96793
(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.a.1	I found the current eCrim it was missplace, and I put back in my C.T.A personal binder record.	09/23/20	I will be sure that Background check place in the personal binder record all the time for compliant, and mark at the Calendar be sure is up to date.
46.a	Fire drill monthly conduct was place in my C.T.A. personal binder record.	09/22/20	I will be sure that I never skip to do Fire Drill conduct in a monthly bases and mark in the calendar the date before due date at least 1 week advance.
3P.e.1	Client #2 was moved to the Client Approved sharing room for Fire safety .	09/22/20	I will be sure that in the future any Client's come to my F.H. is place on the Approved room for safety.
49.a.4	Partial kitchen is accissible to the Clients with wheelchair bound doorway with the measure of 4feet wide.	10/03/20	In the future i will be sure that Kitchen is open and accissible on any clients to help themself for snack and ETC.
49.a.5	Smoke Alarm Dectectors are all working and in good coditions.	09/22/20	I will be sure that would not happend again in the future that smoke detectors are working, I will check all the time be sure the Battery are not Law.

☒ All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10/07/20

☒ CTA has reviewed all corrected items